

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

APRIA HEALTHCARE INC POLITICAL ACTION COMMITTEE (FKA)HOMEDCO INC PAC

ADDRESS (number and street) ▼

26220 ENTERPRISE COURT

☐ Check if different than previously reported. (ACC)

LAKE FOREST

CA

92630

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00240218

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☒ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
07 01 2013

through

M M M / D D D / Y Y Y Y Y Y
12 31 2013

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer RAOUL SMYTH

Signature of Treasurer

RAOUL SMYTH

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
01 24 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

APRIA HEALTHCARE INC POLITICAL ACTION COMMITTEE (FKA)HOMEDCO INC PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
07 01 2013 To: M M / D D / Y Y Y Y Y Y
12 31 2013

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2013		153418.65
(b) Cash on Hand at Beginning of Reporting Period.....	163146.15	
(c) Total Receipts (from Line 19)	18482.50	38710.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	181628.65	192128.65
7. Total Disbursements (from Line 31)	0	10500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	181628.65	181628.65
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

APRIA HEALTHCARE INC POLITICAL ACTION COMMITTEE (FKA)HOMEDCO INC PAC

Report Covering the Period:

From:

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	01	/	2013

To:

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2013

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

16480.00

26080.00

(ii) Unitemized

2002.50

12630.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ►

18482.50

38710.00

(b) Political Party Committees

0

0

(c) Other Political Committees

(such as PACs).....

0

0

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ►

18482.50

38710.00

12. Transfers From Affiliated/Other

Party Committees.....

0

0

13. All Loans Received

0

0

14. Loan Repayments Received.....

0

0

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0

0

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0

0

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0

0

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0

0

(b) Levin Funds (from Schedule H5)

0

0

(c) Total Transfers (add 18(a) and 18(b))..

0

0

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ►

18482.50

38710.00

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ►

18482.50

38710.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0	0
(ii) Non-Federal Share.....	0	0
(b) Other Federal Operating Expenditures	0	0
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0	0
22. Transfers to Affiliated/Other Party Committees.....	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0	10500.00
24. Independent Expenditures (use Schedule E)	0	0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0	0
26. Loan Repayments Made.....	0	0
27. Loans Made.....	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0	0
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0	0
29. Other Disbursements	0	0
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0	0
(ii) "Levin" Share.....	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds	0	0
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	0	10500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0	10500.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	18482.50	38710.00
34. Total Contribution Refunds (from Line 28(d))	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	18482.50	38710.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	0	0
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	0	0

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 23

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

APRIA HEALTHCARE INC POLITICAL ACTION COMMITTEE (FKA)HOMEDCO INC PAC

Full Name (Last, First, Middle Initial)

A. Gary T Ake

Mailing Address 249 Eastfield Ave

City

Stedman

State

NC

Zip Code

28391-9449

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

Branch Manager 3

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2013

Transaction ID : 387-P19841

Amount of Each Receipt this Period

60.00

Payroll Deduction

(\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Robert Allen

Mailing Address 7893 S Argonne Ct

City

Centennial

State

CO

Zip Code

80016-1803

FEC ID number of contributing
federal political committee.

C

Name of Employer

Coram, Inc.

Occupation

EVP, Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2013

Transaction ID : 381-P19510

Amount of Each Receipt this Period

800.00

Payroll Deduction

(\$100.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Amy J Anderson

Mailing Address 6699 Old Ridge Rd

City

Fairview

State

PA

Zip Code

16415-2056

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria

Occupation

Branch Manager 1

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2013

Transaction ID : 387-P19869

Amount of Each Receipt this Period

60.00

Payroll Deduction

(\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶

920.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 23

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

APRIA HEALTHCARE INC POLITICAL ACTION COMMITTEE (FKA)HOMEDCO INC PAC

Full Name (Last, First, Middle Initial)

A. Rochelle Arini-Moza

Mailing Address 20063 Balmoral Dr

City

Macomb

State

MI

Zip Code

48044-2847

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

Area Operations Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2013

Transaction ID : 387-P19900

Amount of Each Receipt this Period

195.00

Payroll Deduction

(\$15.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Thomas J. Barron

Mailing Address 48 Summit Ave

City

Quincy

State

MA

Zip Code

02170-3701

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

Divison VP Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2013

Transaction ID : 387-P19894

Amount of Each Receipt this Period

325.00

Payroll Deduction

(\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Doreen R Bellucci

Mailing Address 2 Brigmore Aisle

City

Irvine

State

CA

Zip Code

92603-5720

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

VP, Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

910.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2013

Transaction ID : 387-P19842

Amount of Each Receipt this Period

455.00

Payroll Deduction

(\$35.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

975.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 23

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

APRIA HEALTHCARE INC POLITICAL ACTION COMMITTEE (FKA)HOMEDCO INC PAC

Full Name (Last, First, Middle Initial)

A. Donna S Blake

Mailing Address 14107 Pembroke St

City

Leawood

State

KS

Zip Code

66224-4553

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

Regional VP Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 27 / 2013

Transaction ID : 387-P19843

Amount of Each Receipt this Period

195.00

Payroll Deduction

(\$15.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. James C Bowers

Mailing Address 256 Aerie Ct

City

Roseville

State

CA

Zip Code

95661-4063

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

Market Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 27 / 2013

Transaction ID : 387-P19844

Amount of Each Receipt this Period

260.00

Payroll Deduction

(\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Bruce E Brindle

Mailing Address 3396 Altherton Dr

City

Bethel Park

State

PA

Zip Code

15102-1161

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

Regional VP Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 27 / 2013

Transaction ID : 387-P19845

Amount of Each Receipt this Period

60.00

Payroll Deduction

(\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

515.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

APRIA HEALTHCARE INC POLITICAL ACTION COMMITTEE (FKA)HOMEDCO INC PAC

Full Name (Last, First, Middle Initial)

A. Carl L. Caldwell

Mailing Address 513 California Ave

City

Oakdale

State

CA

Zip Code

95361-3005

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

Branch Manager 4

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

12 / 27 / 2013

Transaction ID : 387-P19874

Amount of Each Receipt this Period

60.00

Payroll Deduction

(\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Mark A Centolella

Mailing Address 8304 Codys Cors

City

Cicero

State

NY

Zip Code

13039-7921

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

Area VP Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

910.00

Date of Receipt

12 / 27 / 2013

Transaction ID : 387-P19846

Amount of Each Receipt this Period

455.00

Payroll Deduction

(\$35.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Danny R. Claycomb

Mailing Address 6301 Shea Pl

City

Highlands Ranch

State

CO

Zip Code

80130-8026

FEC ID number of contributing
federal political committee.

C

Name of Employer

Coram, Inc.

Occupation

SVP, IV Billing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

12 / 27 / 2013

Transaction ID : 387-P19901

Amount of Each Receipt this Period

390.00

Payroll Deduction

(\$30.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

905.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 23

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

APRIA HEALTHCARE INC POLITICAL ACTION COMMITTEE (FKA)HOMEDCO INC PAC

Full Name (Last, First, Middle Initial)

A. Kirby Combs

Mailing Address 320 Urbano Dr

City

San Francisco

State

CA

Zip Code

94127-2869

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

VP National Accounts

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

910.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2013

Transaction ID : 387-P19847

Amount of Each Receipt this Period

455.00

Payroll Deduction

(\$35.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Kenneth A. Common

Mailing Address 1238 N Raymond Ave

City

Fullerton

State

CA

Zip Code

92831-2048

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

VP Real Estate Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

910.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2013

Transaction ID : 387-P19895

Amount of Each Receipt this Period

455.00

Payroll Deduction

(\$35.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Jeannine M. Delivron

Mailing Address 54 Bronson Rd

City

Avon

State

CT

Zip Code

06001-2929

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

Branch Manager 4

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2013

Transaction ID : 387-P19876

Amount of Each Receipt this Period

60.00

Payroll Deduction

(\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

970.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

APRIA HEALTHCARE INC POLITICAL ACTION COMMITTEE (FKA)HOMEDCO INC PAC

Full Name (Last, First, Middle Initial)

A. Michael K Dwyer

Mailing Address 408 W State St

City
Burlington

State Zip Code
WI 53105-1736

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

Area Operations Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

12 / 27 / 2013

Transaction ID : 387-P19848

Amount of Each Receipt this Period

195.00

Payroll Deduction

(\$15.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Stephen L Foreman

Mailing Address 21 Sea Grape Rd

City
Ladera Ranch

State Zip Code
CA 92694-1315

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

Division VP Ancillary Business

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

12 / 27 / 2013

Transaction ID : 387-P19849

Amount of Each Receipt this Period

260.00

Payroll Deduction

(\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Matthew J Gallagher

Mailing Address 5 Safeguard Pl

City
Irvine

State Zip Code
CA 92602-0757

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

VP Sales Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

12 / 27 / 2013

Transaction ID : 387-P19850

Amount of Each Receipt this Period

325.00

Payroll Deduction

(\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

780.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

APRIA HEALTHCARE INC POLITICAL ACTION COMMITTEE (FKA)HOMEDCO INC PAC

Full Name (Last, First, Middle Initial)

A. Lisa M Getson

Mailing Address 24806 Oxford Dr

City

Laguna Niguel

State

CA

Zip Code

92677-8870

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

Exec VP Govt Rel/Invst Re

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1950.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 27 / 2013

Transaction ID : 387-P19851

Amount of Each Receipt this Period

975.00

Payroll Deduction

(\$75.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Steven D Gradwell

Mailing Address 1549 W Saltsage Dr

City

Phoenix

State

AZ

Zip Code

85045-1706

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

Area VP Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 23 / 2013

Transaction ID : 376-P19139

Amount of Each Receipt this Period

100.00

Payroll Deduction

(\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Michael A Graves

Mailing Address 7430 Lombardi Dr

City

Plainfield

State

IN

Zip Code

46168-2804

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

Dir, Enteral Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 27 / 2013

Transaction ID : 387-P19852

Amount of Each Receipt this Period

260.00

Payroll Deduction

(\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1335.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 23

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

APRIA HEALTHCARE INC POLITICAL ACTION COMMITTEE (FKA)HOMEDCO INC PAC

Full Name (Last, First, Middle Initial)

A. Thomas M. Halpin

Mailing Address 9112 Meade Ave

City

Oak Lawn

State

IL

Zip Code

60453-1571

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

Branch Manager 3

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2013

Transaction ID : 387-P19879

Amount of Each Receipt this Period

60.00

Payroll Deduction

(\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Dwayne A Hargis

Mailing Address 926 Ironwood Trl

City

Greenwood

State

IN

Zip Code

46143-3042

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

Area VP Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1170.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2013

Transaction ID : 387-P19853

Amount of Each Receipt this Period

585.00

Payroll Deduction

(\$45.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Robert S Holcombe

Mailing Address 38 Oakbrook

City

Coto de Caza

State

CA

Zip Code

92679-4742

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

Exec VP General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1950.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2013

Transaction ID : 387-P19854

Amount of Each Receipt this Period

975.00

Payroll Deduction

(\$75.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

1620.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 23

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

APRIA HEALTHCARE INC POLITICAL ACTION COMMITTEE (FKA)HOMEDCO INC PAC

Full Name (Last, First, Middle Initial)

A. Janet L Hunt

Mailing Address 26552 San Torini Rd

City

Mission Viejo

State

CA

Zip Code

92692-6101

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

Dir IS Support Svs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2013

Transaction ID : 387-P19855

Amount of Each Receipt this Period

60.00

Payroll Deduction

(\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. LaDawn E. Jung

Mailing Address 16746 Wikiup Rd

City

Ramona

State

CA

Zip Code

92065-4189

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

Billing Center Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2013

Transaction ID : 387-P19897

Amount of Each Receipt this Period

60.00

Payroll Deduction

(\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Jerry Kellems

Mailing Address 2030 N Talbott St

City

Indianapolis

State

IN

Zip Code

46202-1536

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

Branch Manager 2

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2013

Transaction ID : 387-P19881

Amount of Each Receipt this Period

60.00

Payroll Deduction

(\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

180.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 23

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

APRIA HEALTHCARE INC POLITICAL ACTION COMMITTEE (FKA)HOMEDCO INC PAC

Full Name (Last, First, Middle Initial)

A. Jerome D Lafontaine

Mailing Address 8445 S Newcombe St

City

Littleton

State

CO

Zip Code

80127-4260

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

Area VP Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2013

Transaction ID : 387-P19856

Amount of Each Receipt this Period

325.00

Payroll Deduction

(\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Mark S. Lantz

Mailing Address 9918 E 400 S

City

Greentown

State

IN

Zip Code

46936-8960

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

Branch Manager 3

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2013

Transaction ID : 387-P19883

Amount of Each Receipt this Period

60.00

Payroll Deduction

(\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Melissa Leone

Mailing Address 150 Bear Path Rd

City

Hamden

State

CT

Zip Code

06514-1329

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

Director Nursing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2013

Transaction ID : 387-P19884

Amount of Each Receipt this Period

260.00

Payroll Deduction

(\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

645.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 23

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

APRIA HEALTHCARE INC POLITICAL ACTION COMMITTEE (FKA)HOMEDCO INC PAC

Full Name (Last, First, Middle Initial)

A. Clinton K. Marshall

Mailing Address 32 Wellwood Rd

City

Portland

State

ME

Zip Code

04103-4232

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

Branch Manager 4

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2013

Transaction ID : 387-P19886

Amount of Each Receipt this Period

60.00

Payroll Deduction

(\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Michael F. McGrath

Mailing Address 1209 Reggio Aisle

City

Irvine

State

CA

Zip Code

92606-0855

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

Dir. Internal Audit

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2013

Transaction ID : 387-P19887

Amount of Each Receipt this Period

260.00

Payroll Deduction

(\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

c. Mary K. McHugh

Mailing Address 1011 Ashwood Ln

City

Medina

State

OH

Zip Code

44256-1263

FEC ID number of contributing
federal political committee.

C

Name of Employer

Coram, Inc.

Occupation

RVP, Infusion Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2013

Transaction ID : 387-P19898

Amount of Each Receipt this Period

260.00

Payroll Deduction

(\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

580.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 OF 23

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

APRIA HEALTHCARE INC POLITICAL ACTION COMMITTEE (FKA)HOMEDCO INC PAC

Full Name (Last, First, Middle Initial)

A. Michael L McKinney

Mailing Address 209 Nunzia Ct

City

Roseville

State

CA

Zip Code

95661-3979

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

Division VP Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2013

Transaction ID : 387-P19857

Amount of Each Receipt this Period

650.00

Payroll Deduction

(\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Cregg E. Mericle

Mailing Address 310 W Broadway St

City

Plattsburg

State

MO

Zip Code

64477-1414

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

Branch Manager 3

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2013

Transaction ID : 387-P19888

Amount of Each Receipt this Period

60.00

Payroll Deduction

(\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Dean W. Milligan

Mailing Address 521 Andalusian Rd

City

Schwenksville

State

PA

Zip Code

19473-1882

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

Division VP Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1560.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2013

Transaction ID : 387-P19889

Amount of Each Receipt this Period

780.00

Payroll Deduction

(\$60.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

1490.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 OF 23
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

APRIA HEALTHCARE INC POLITICAL ACTION COMMITTEE (FKA)HOMEDCO INC PAC

Full Name (Last, First, Middle Initial)

A. Patrick D O Donnell

Mailing Address 103 Windemere Way

City State Zip Code
Colchester VT 05446-6914

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

Branch Manager 2

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 27 2013

Transaction ID : 387-P19858

Amount of Each Receipt this Period

60.00

Payroll Deduction

(\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Carol Policelli

Mailing Address 2600 Shieldale Dr

City State Zip Code
Winston Salem NC 27107-3654

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

Branch Manager 3

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 27 2013

Transaction ID : 387-P19890

Amount of Each Receipt this Period

60.00

Payroll Deduction

(\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Marilyn K. Roarty

Mailing Address 122 S 202nd St

City State Zip Code
Elkhorn NE 68022-4895

FEC ID number of contributing
federal political committee.

C

Name of Employer

Coram

Occupation

Branch Infusion Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 27 2013

Transaction ID : 387-P19904

Amount of Each Receipt this Period

60.00

Payroll Deduction

(\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

180.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 OF 23

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

APRIA HEALTHCARE INC POLITICAL ACTION COMMITTEE (FKA)HOMEDCO INC PAC

Full Name (Last, First, Middle Initial)

A. Kimberlie K Rogers-Bowers

Mailing Address 91 E Chevalier Ct

City

Eighty Four

State

PA

Zip Code

15330-2691

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

Sr VP Reg Affairs & Acq I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2013

Transaction ID : 387-P19859

Amount of Each Receipt this Period

325.00

Payroll Deduction

(\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Garrett Y Saito

Mailing Address 28 Flintstone

City

Aliso Viejo

State

CA

Zip Code

92656-1919

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

VP Logistics

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2013

Transaction ID : 387-P19860

Amount of Each Receipt this Period

325.00

Payroll Deduction

(\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Tami Salley

Mailing Address 304 Oak Ridge Dr

City

Venetia

State

PA

Zip Code

15367-1160

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

Division VP Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1560.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2013

Transaction ID : 387-P19861

Amount of Each Receipt this Period

780.00

Payroll Deduction

(\$60.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

1430.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 20 OF 23

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

APRIA HEALTHCARE INC POLITICAL ACTION COMMITTEE (FKA)HOMEDCO INC PAC

Full Name (Last, First, Middle Initial)

A. Richard H. Scholl

Mailing Address 7 Slater Dr

City

Stony Point

State

NY

Zip Code

10980-1907

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

Division Respiratory Mgr.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

12 / 27 / 2013

Transaction ID : 387-P19891

Amount of Each Receipt this Period

260.00

Payroll Deduction

(\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. James R. Sepeda

Mailing Address 4436 Canterbury Way

City

Union City

State

CA

Zip Code

94587-2599

FEC ID number of contributing
federal political committee.

C

Name of Employer

Coram, Inc.

Occupation

Regional Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

12 / 27 / 2013

Transaction ID : 387-P19902

Amount of Each Receipt this Period

60.00

Payroll Deduction

(\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. David L. Slack

Mailing Address 17076 Birds Eye Dr

City

Perris

State

CA

Zip Code

92570-7376

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

VP, Network

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

12 / 27 / 2013

Transaction ID : 387-P19892

Amount of Each Receipt this Period

260.00

Payroll Deduction

(\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

580.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 OF 23

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

APRIA HEALTHCARE INC POLITICAL ACTION COMMITTEE (FKA)HOMEDCO INC PAC

Full Name (Last, First, Middle Initial)

A. Sandra L. Slentz

Mailing Address 4050 S 1100 W

City

Modoc

State

IN

Zip Code

47358-9520

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

Branch Manager 4

Receipt For:

☐
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2013

Transaction ID : 387-P19893

Amount of Each Receipt this Period

60.00

Payroll Deduction

(\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Raoul Smyth

Mailing Address 11 Ensueno E

City

Irvine

State

CA

Zip Code

92620-1844

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

VP, Associate General Counsel

Receipt For:

☐
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

910.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2013

Transaction ID : 387-P19862

Amount of Each Receipt this Period

455.00

Payroll Deduction

(\$35.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Gregory A Tewell

Mailing Address 213 N Willow Springs Rd

City

Orange

State

CA

Zip Code

92869-4534

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

VP Business Systems

Receipt For:

☐
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2013

Transaction ID : 387-P19863

Amount of Each Receipt this Period

390.00

Payroll Deduction

(\$30.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

905.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 OF 23

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

APRIA HEALTHCARE INC POLITICAL ACTION COMMITTEE (FKA)HOMEDCO INC PAC

Full Name (Last, First, Middle Initial)

A. Andrew Cameron Thompson

Mailing Address 20 Westchester Ct

City State Zip Code
Coto de Caza CA 92679-4956

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

Exec VP Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1950.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 27 2013

Transaction ID : 387-P19864

Amount of Each Receipt this Period

975.00

Payroll Deduction

(\$75.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Deanna P Thompson

Mailing Address 177 Montalvo Rd

City State Zip Code
Redwood City CA 94062-3820

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

Division VP Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 27 2013

Transaction ID : 387-P19865

Amount of Each Receipt this Period

650.00

Payroll Deduction

(\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Andrew Wagner

Mailing Address 670 Carson Ct

City State Zip Code
Carmel IN 46033-9744

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

Branch Manager 2

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 27 2013

Transaction ID : 387-P19867

Amount of Each Receipt this Period

195.00

Payroll Deduction

(\$15.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1820.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 23 OF 23

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

APRIA HEALTHCARE INC POLITICAL ACTION COMMITTEE (FKA)HOMEDCO INC PAC

Full Name (Last, First, Middle Initial)

A. Julie Williams

Mailing Address 643 Big Oak Ct

City

Rockwall

State

TX

Zip Code

75087-2260

FEC ID number of contributing
federal political committee.

C

Name of Employer

Coram, Inc.

Occupation

Director, Ambulatory Infctve

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 27 / 2013

Transaction ID : 387-P19903

Amount of Each Receipt this Period

325.00

Payroll Deduction

(\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Mary F. Zega

Mailing Address 10346 Alveston St

City

Orland Park

State

IL

Zip Code

60462-3072

FEC ID number of contributing
federal political committee.

C

Name of Employer

Coram, Inc.

Occupation

SVP, Infusion Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 27 / 2013

Transaction ID : 387-P19899

Amount of Each Receipt this Period

325.00

Payroll Deduction

(\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

650.00

16480.00